Colvido Columbiados for CLD Involoció				
SLD Invoice Number	2689186			
Invoice Line Number	8837712			
Service Provider Name	SMG Com	nputing, Inc.		
Service Provider SPIN	14303123	143031233		
Service Provider Invoice #	15_FRN 2837203			
Undiscounted Invoice Amount	\$2,308.00			
Discounted Invoice Amount	\$1,961.80			
Applicant Name	ST. ANTHONY SCHOOL OF MILWAUKEE			
Representative / Contact Name	RICHARD SENTURIA			
Representative / Contact Title	CONSULTANT			
Representative / Contact Phone	314-282-3676			
Billed Entity Number (BEN)	61046			
471 Number	1040928			
FRN	2837203			
Date Goods/Services Delivered				
Date Goods/Services were or will be Installed	7/27/15			
Date Applicant Portion Paid and Check No. or Date will be Paid	7/1/16 – check #33833			
This is to certify that I am authorized to represent the above named Applicant. This is also to certify the services described on the attached vendor invoice with delivered and/or installed as indicated by the date(stabove.		The charges represented by the above represented invoice are deposits or up-front charges for services, which have not been delivered, and have been agreed to based on the contract between the above referenced Applicant and Service Provider		
Copy of detailed vendor invoice must be attached. Contract with Service Provider above is for Delivery only Yes No		Copy of supporting contract must be attached if indicated below		
Delivery and Installation Yes X No		Supporting Contract Required YES NO		
Signed: Juhna Sentura		Signed:		
Date: 0/24//K		Date: Schools and Library Division (USAC)		

Revised 08/27/2012

SLD Invoice Number	2689186			
Invoice Line Number	8837713			
Service Provider Name	SMG Computing, Inc.			
Service Provider SPIN	143031233			
Service Provider Invoice #	15_FRN 2837203			
Undiscounted Invoice Amount	\$43,899.00			
Discounted Invoice Amount	\$37,314.15			
Applicant Name	ST. ANTHONY SCHOOL OF MILWAUKEE			
Representative / Contact Name	RICHARD SENTURIA			
Representative / Contact Title	CONSULTANT			
Representative / Contact Phone	314-282-3676			
Billed Entity Number (BEN)	61046			
471 Number	1040928			
FRN	2837203			
Date Goods/Services Delivered	·			
Date Goods/Services were or will be Installed	7/27/15			
Date Applicant Portion Paid and Check No. or Date will be Paid	7/1/16 – check #33833			

services described on the attached vendor invoice were delivered and/or installed as indicated by the date(s) above.	which have not been delivered, and have been agreed to based on the contract between the above referenced Applicant and Service Provider
Copy of <u>detailed</u> vendor invoice must be attached. Contract with Service Provider above is for Delivery only Yes No Delivery and Installation Yes _X No	Copy of supporting contract must be attached if indicated below Supporting Contract Required YES NO
Signed: Richard Sonturia Date: 10/29/18	Signed: Date:

Revised 08/27/2012

SLD Invoice Number	2689186		
Invoice Line Number	8837714		
Service Provider Name	SMG Computing, Inc.		
Service Provider SPIN	143031233		
Service Provider Invoice #	15_FRN 2837203		
Undiscounted Invoice Amount	\$34,224.00		
Discounted Invoice Amount	\$29,090.40		
Applicant Name	ST. ANTHONY SCHOOL OF MILWAUKEE		
Representative / Contact Name	RICHARD SENTURIA		
Representative / Contact Title	CONSULTANT		
Representative / Contact Phone	314-282-3676		
Billed Entity Number (BEN)	61046		
471 Number	1040928		
FRN	2837203		
Date Goods/Services Delivered			
Date Goods/Services were or will be Installed	7/27/15		
Date Applicant Portion Paid and Check No. or Date will be Paid	8/14/16 - check #32284		
This is to certify that I am authorized to repres above named Applicant. This is also to certify services described on the attached vendor invo delivered and/or installed as indicated by the dabove.	y the invoice are deposits or up-front charges for services, bice were which have not been delivered, and have been agreed		
Copy of <u>detailed</u> vendor invoice must be attacentract with Service Provider above is for Delivery only Yes No	tached. Copy of supporting contract must be attached if		
Delivery and Installation Yes X No	Supporting Contract Required YES NO		
Signed: Killyana Zentum 10	Signed:		
10100/10			

Revised 08/27/2012

SLD Invoice Number	2689186			
Invoice Line Number	8837715			
Service Provider Name	SMG Computing, Inc.			
Service Provider SPIN	143031233			
Service Provider Invoice #	15_FRN 2837203			
Undiscounted Invoice Amount	\$34,318.00			
Discounted Invoice Amount	\$29,17	\$29,170.30		
Applicant Name	ST. ANTHONY SCHOOL OF MILWAUKEE			
Representative / Contact Name	RICHARD SENTURIA			
Representative / Contact Title	CONSULTANT			
Representative / Contact Phone	314-282-3676			
Billed Entity Number (BEN)	61046			
471 Number	1040928			
FRN	2837203			
Date Goods/Services Delivered				
Date Goods/Services were or will be Installed	7/27/15			
Date Applicant Portion Paid and Check No. or Date will be Paid	7/1/16 – check #33833			
This is to certify that I am authorized to represent the above named Applicant. This is also to certify the services described on the attached vendor invoice were delivered and/or installed as indicated by the date(s) above.		Or	The charges represented by the above represented invoice are deposits or up-front charges for services, which have not been delivered, and have been agreed to based on the contract between the above referenced Applicant and Service Provider	
Copy of <u>detailed</u> vendor invoice must be attached. Contract with Service Provider above is for Delivery only Yes No			Copy of supporting contract must be attached if indicated below	
Signed: Signed			Supporting Contract Required YES NO Signed:	
100/10				

Revised 08/27/2012

Date:

SLD Invoice Number	2689186			
Invoice Line Number	8837716			
Service Provider Name	SMG Computing, Inc.			
Service Provider SPIN	143031233			
Service Provider Invoice #	15_FRN 2837203			
Undiscounted Invoice Amount	\$4,039	\$4,039.00		
Discounted Invoice Amount	\$3,433	\$3,433.15		
Applicant Name	ST. ANTHONY SCHOOL OF MILWAUKEE			
Representative / Contact Name	RICHARD SENTURIA			
Representative / Contact Title	CONSULTANT			
Representative / Contact Phone	314-282-3676			
Billed Entity Number (BEN)	61046			
471 Number	1040928			
FRN	2837203			
Date Goods/Services Delivered				
Date Goods/Services were or will be Installed	7/27/15			
Date Applicant Portion Paid and Check No. or Date will be Paid	7/1/16 – check #33833			
This is to certify that I am authorized to represent the above named Applicant. This is also to certify the services described on the attached vendor invoice were delivered and/or installed as indicated by the date(s) above.		Or	The charges represented by the above represented invoice are deposits or up-front charges for services, which have not been delivered, and have been agreed to based on the contract between the above referenced Applicant and Service Provider	
Copy of <u>detailed</u> vendor invoice must be attached. Contract with Service Provider above is for Delivery only Yes No			Copy of <u>supporting contract</u> must be attached if indicated below	
Signed: Victorian Ves X No			Supporting Contract Required YES NO Signed:	
Signed. 10 A TANK PARA MANAMA			organou.	

Revised 08/27/2012

Date: